CLAIMS ONLY	Application Number 10/517,015	Filing Date
1-4-06	Applicant(s)	

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend		* May be used for additional claims or amendments						
1							51							
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48							98							
49							99							
50							100							
Total Indep			6				Total Indep							
Total Depend			3				Total Depend							
Total Claims			9				Total Claims							